		17/7/41111	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Fill in this info	rmation to identify your	case:			
Debtor 1	William T. Reitz				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case number	19-70481				
(if known)				_	Check if t

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

•			
Par	t 1: Summarize Your Assets		
		Your a	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	85,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,136.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	109,136.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	82,732.77
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	140.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	14,011.70
	Your total liabilities	\$	96,884.47
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,758.30
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,650.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Page 2 of 48
Case number (if known) 19-70481 Debtor 1 William T. Reitz

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,951.70

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	140.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	140.00

	Case	e 19-70481-JA	4D Doc 21	_		a 09/13/ iment		Enteredue 3 of 4		3/19 06	0:38:23	3 D	esc Main
Fill in	this info	rmation to identify	your case and th			шеш	Fal	E 3 01 4	łO.				
Debto	or 1	William T. Re		Name			Last Na	me					
Debto (Spous	or 2 e, if filing)	First Name	Middle	Name			Last Na	me					
Unite	d States E	Sankruptcy Court for	the: WESTERN	DISTR	RIC	T OF PENN	ISYLVA	NIA					
Case	number	19-70481					_						Check if this is an amended filing
Scl n each	hedu n category fits best.	Be as complete and a	coperty escribe items. List	e. If two	o m	arried people	are filir	ig together,	both are	equally res	ponsible f	or supp	
	r every qu	ore space is needed, a estion. e Each Residence, Bu	•					•		write your	name and	d case n	umber (if known).
■ \ 1.1		e is the property?		What	at is	the property	1? Check :	all that apply					
_		ory Lane s, if available, or other desc	cription		֧֓֞֞֜֞֜֞֞֜֞֞֜֞֞֜֞֞֜֞֜֞֓֓֓֓֞֜֜֞֜֜֡֓֓֓֞֜֜֡֡֡֡֡֡֡֡	Single-family h Duplex or mult Condominium	ti-unit bui	=		the amour	nt of any se	ecured c	s or exemptions. Put laims on Schedule D: Secured by Property.
_	Lanse	PA State	16849-0000 ZIP Code		-] !	Manufactured Land Investment pro		e home		Current v entire pro		ı	Current value of the portion you own? \$85,000.00
	•] -	Timeshare Other as an interest Debtor 1 only		roperty? Che	eck one	Describe	the nature fee simple ite), if kno	e of you e, tenan	r ownership interest cy by the entireties, or
_	Clearfiel	d			_ `	Debtor 2 only							
(County] / er ii	Debtor 1 and E At least one of Information you I identification	the deb	tors and anot		(see in	nstructions)	s comm	unity property
						ence larket Valu	ue Dete	ermined E	By Com	parable S	Sales		
		ollar value of the po have attached for I											\$85,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 19-70481-JAD Doc 21 Filed 09/13/19 Entered 09/13/19 06:38:23 Desc Main Page 4 of 48 Document Case number (if known) 19-70481 Debtor 1 William T. Reitz 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Cruze Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2018 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 22,000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Location: 201 Hickory Lane, \$16,575.00 \$16,575.00 **Lanse PA 16849** ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,575.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Various Household Goods & Furnishings Summary Available Upon Request \$4,800.00 Location: 201 Hickory Lane, Lanse PA 16849 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No

Yes. Describe.....

Page 5 of 48 Document Case number (if known) 19-70481 Debtor 1 William T. Reitz **Miscellaneous Firearms** \$2,000.00 Location: 201 Hickory Lane, Lanse PA 16849 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$150.00 Location: 201 Hickory Lane, Lanse PA 16849 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Jewelry \$100.00 Location: 201 Hickory Lane, Lanse PA 16849 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,050.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Cash \$11.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

C	ase 19-70481-JAD DUC		719 EIILEIEU 09/13/.	19 00.38.23	Desc Main
Debtor 1	William T. Reitz	Document	Page 6 of 48 Case nur	mber (if known) _1	19-70481
☐ Yes.	Give specific information about them Name of entity:		% of ow	nership:	
Nego: Non-r ■ No	nment and corporate bonds and other tiable instruments include personal check negotiable instruments are those you can Give specific information about them	cks, cashiers' checks, pro	missory notes, and money orde	:rs.	
	Issuer name: ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 4	.01(k), 403(b), thrift saving	s accounts, or other pension or	r profit-sharing pla	ans
Yes.	List each account separately. Type of account:	Institution r	name:		
	41 (k)	Quality N	lachining Inc.		\$500.00
Your s Exam	ity deposits and prepayments share of all unused deposits you have n ples: Agreements with landlords, prepa				s, or others
■ No □ Yes.		Institution r	name or individual:		
23. Annui No	ties (A contract for a periodic payment	of money to you, either fo	r life or for a number of years)		
☐ Yes.	Issuer name and descri	ption.			
	ats in an education IRA, in an accoun .C. §§ 530(b)(1), 529A(b), and 529(b)(1		ogram, or under a qualified st	ate tuition progr	ram.
☐ Yes.	Institution name and de	scription. Separately file the	he records of any interests.11 U	I.S.C. § 521(c):	
25. Trusts ■ No	s, equitable or future interests in prop	perty (other than anythir	g listed in line 1), and rights	or powers exerc	isable for your benefit
☐ Yes.	Give specific information about them				
	ts, copyrights, trademarks, trade sec ples: Internet domain names, websites,				
☐ Yes.	Give specific information about them				
Exam ■ No	ses, franchises, and other general int ples: Building permits, exclusive license	es, cooperative associatio	n holdings, liquor licenses, prof	essional licenses	
	Give specific information about them				
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re ■ No	funds owed to you				
☐ Yes.	Give specific information about them, i	including whether you alre	ady filed the returns and the tax	x years	
■ No	ples: Past due or lump sum alimony, sp	oousal support, child supp	ort, maintenance, divorce settle	ment, property se	ettlement
⊔ Yes.	Give specific information				

Official Form 106A/B Schedule A/B: Property page 4

Desc Main Case 19-70481-JAD Doc 21 Filed 09/13/19 Entered 09/13/19 06:38:23 Page 7 of 48 Case number (if known) 19-70481 Document Debtor 1 William T. Reitz 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$511.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Entered 09/13/19 06:38:23 Desc Main Case 19-70481-JAD Doc 21 Filed 09/13/19 Document

Page 8 of 48 Case number (if known) 19-70481 Debtor 1 William T. Reitz List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 55. \$85,000.00 Part 2: Total vehicles, line 5 56. \$16,575.00 Part 3: Total personal and household items, line 15 57. \$7,050.00 58. Part 4: Total financial assets, line 36 \$511.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$24,136.00 Copy personal property total 62. \$24,136.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$109,136.00

Fill in this infor	mation to identify your	case:		
Debtor 1	William T. Reitz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number	19-70481			
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as I	Exempt								
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.						
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che							
	201 Hickory Lane Lanse, PA 16849 Clearfield County	\$85,000.00		\$24,785.00	11 U.S.C. § 522(d)(1)					
	Residence Fair Market Value Determined By Comparable Sales Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2018 Chevrolet Cruze 22,000 miles Location: 201 Hickory Lane, Lanse	\$16,575.00		\$1,089.55	11 U.S.C. § 522(d)(2)					
	PA 16849 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	Various Household Goods & Furnishings	\$4,800.00		\$4,800.00	11 U.S.C. § 522(d)(3)					
	Summary Available Upon Request Location: 201 Hickory Lane, Lanse PA 16849 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	Miscellaneous Firearms				44 11 5 0 5 522/4//2/					
	Location: 201 Hickory Lane, Lanse	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)					
	PA 16849 Line from <i>Schedule A/B</i> : 10.1			100% of fair market value, up to any applicable statutory limit						

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				` ,	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che		
	Clothing Location: 201 Hickory Lane, Lanse	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
	PA 16849 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Location: 201 Hickory Lane, Lanse	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
	PA 16849 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$11.00	•	\$11.00	11 U.S.C. § 522(d)(5)
	Ellie Holli Genedale A/B. 1011			100% of fair market value, up to any applicable statutory limit	
	41 (k): Quality Machining Inc. Line from Schedule A/B: 21.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(12)
	Life Holli Schedule PAB. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property cover	ed by the exemption wi	ithin 1	215 days before you filed this case	32
	□ No	ca by the exemption wi		,210 days belote you filed this case	•:
	☐ Yes				

			<u> </u>)	
Fill in this info	rmation to identify your	case:			
Debtor 1	William T. Reitz				
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	19-70481				
(if known)	10 10401				Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Column C

Column B

Column A

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. Lis	st all secured claims. If a creditor has	more than one secured claim, list the cre	editor separately	Column A	Column B	Column C
for ea	ach claim. If more than one creditor has	s a particular claim, list the other creditor ical order according to the creditor's nan	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	Clearfield County Tax			•		
2.1	Claim Bureau	Describe the property that secures	the claim:	\$11,032.32	\$85,000.00	\$0.00
	Creditor's Name	201 Hickory Lane Lanse, PA	A 16849			
		Clearfield County				
		Residence				
		Fair Market Value Determin	ed Bv			
		Comparable Sales				
	230 East Market Street	As of the date you file, the claim is:	Check all that			
аррі		apply.				
	Clearfield, PA 16830	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 only	☐ An agreement you made (such as	mortgage or secu	ıred		
_	ebtor 2 only	car loan)				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
ПΑ	t least one of the debtors and another	☐ Judgment lien from a lawsuit				
	check if this claim relates to a community debt	Other (including a right to offset)	Real Estate	Tax Lien		
Date	debt was incurred 2013-2018	Last 4 digits of account num	ber 1683			

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Debtor 1 William T. Reitz	Case number (if known)	19-70481	19-70481		
First Name Middle N	lame Last Name				
2.2 M & T Bank Mortgage	Describe the property that secures the claim:	\$56,215.00	\$85,000.00	\$0.00	
Creditor's Name	201 Hickory Lane Lanse, PA 16849 Clearfield County Residence Fair Market Value Determined By Comparable Sales	, , , , , , , , , , , , , , , , , , , ,	V,	,	
1 Fountain Plz Buffalo, NY 14203	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage	е			
Opened 05/07 Last Active Date debt was incurred 3/25/19	Last 4 digits of account number 1897	7			
2.3 Santander	Describe the property that secures the claim:	\$15,485.45	\$16,575.00	\$0.00	
Creditor's Name	2018 Chevrolet Cruze 22,000 miles Location: 201 Hickory Lane, Lanse PA 16849				
P.O. Box 560284 Dallas, TX 75356	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Auto Loa	an			
Date debt was incurred 2019	Last 4 digits of account number 8799	9			
-	Column A on this page. Write that number here:	\$82,732	2.77		
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$82,732	2.77		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docum	nent Page	13 of	48		
Fil	ll in this info	ormation to identify your	case:					
De	ebtor 1	William T. Reitz						
		First Name	Middle Name	Last Nam	е			
	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Nam	e			
` '	, 0,							
Ur	nited States I	Bankruptcy Court for the:	WESTERN DISTRIC	T OF PENNSYLVA	NIA			
Ca	ase number	19-70481						
(if k	known)						_	k if this is an
							amen	nded filing
Эf	ficial Fo	rm 106E/F						
		E/F: Creditors W	ho Have Unse	cured Claim	s			12/15
		and accurate as possible. Us				or creditors with NON	PRIORITY claims. I	
Sch Sch eft. nan	nedule G: Exe nedule D: Cre . Attach the C ne and case r	ontracts or unexpired leases scutory Contracts and Unexp ditors Who Have Claims Sec continuation Page to this pag number (if known).	ired Leases (Official Forr ured by Property. If more je. If you have no informa	n 106G). Do not incl space is needed, c	ude any cro ppy the Par	editors with partially s rt you need, fill it out,	ecured claims that number the entries	are listed in in the boxes on the
		ditors have priority unsecure						
•	□ No. Go to		a ciao agao. you .					
	Yes.							
2.	List all of you identify what possible, list	our priority unsecured claim t type of claim it is. If a claim ha t the claims in alphabetical orde to than one creditor holds a pa	as both priority and nonprio er according to the creditor'	rity amounts, list that s name. If you have r	claim here	and show both priority a	ind nonpriority amou	ints. As much as
	(For an expl	anation of each type of claim,	see the instructions for this	form in the instruction	booklet.)	Tatal alaim	Delevites	Name de disco
	_					Total claim	Priority amount	Nonpriority amount
2.1		nal Revenue Service	Last 4 digits	of account number	2842	\$140.00	\$140.00	90.00
	•	Creditor's Name vency Unit	When was the	he debt incurred?	2011			
	POB	-			2011		-	
		delphia, PA 19101 r Street City State Zip Code		ta waw fila tha alaim	in Obser	all that and by		
		red the debt? Check one.	☐ Continger	te you file, the claim	is: Check	all that apply		
	■ Debtor	1 only	_					
	☐ Debtor	•	☐ Unliquida	tea				
	_	•	☐ Disputed	ORITY unsecured cl	aim·			
	_	1 and Debtor 2 only	Пъ	support obligations	u			
		t one of the debtors and anothe	<u>_</u>	•				
		if this claim is for a commu m subject to offset?	-	d certain other debts r death or personal in	='	-		
	No	in subject to onset?	Other. Sp	•	july wille y	ou were intoxicated		
	☐ Yes		☐ Other. Sp	Federal In	come Ta	ıx		_
D۵	rt 2: List	: All of Your NONPRIORIT	V Uneccured Claims					
		ditors have nonpriority unsec		2				
٥.		have nothing to report in this p			م ماريام م			
	_	nave nothing to report in this p	art. Submit triis lomi to the	court with your other	scriedules.			
	Yes.							
4.	unsecured c	our nonpriority unsecured claim, list the creditor separatel editor holds a particular claim, I	y for each claim. For each o	claim listed, identify w	hat type of	claim it is. Do not list cla	aims already included	d in Part 1. If more

Official Form 106 E/F

Total claim

Debto	r 1 William T. Reitz	Case number (if known) 19-70481	
4.1	Cancer Care Partnership	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO B0x 37808	When was the debt incurred?	
	Baltimore, MD 21297		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical Expenses	
	Cancer Treatment Centers of		Unknown
4.2	America Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	1331 E Wyoming Ave	When was the debt incurred?	
	Philadelphia, PA 19124		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical Expenses	
42	Cooper Township Toy Collector	Last 4 digits of account number	¢0.00
4.3	Cooper Township Tax Collector Nonpriority Creditor's Name		\$0.00
	583 Johnson Road	When was the debt incurred?	
	Grassflat, PA 16839		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Notice Only

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Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection for Mt Nittany Medical Center

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Document Page 16 of 48 Debtor 1 William T. Reitz ase number (if known) 19-70481 4.7 \$0.00 **Credit One Bank** Last 4 digits of account number Nonpriority Creditor's Name Po Box 98875 When was the debt incurred? Las Vegas, NV 89193 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.8 **Duke Cancer Center** Last 4 digits of account number Unknown Nonpriority Creditor's Name 20 Duke Medicine Cir When was the debt incurred? Durham, NC 27710 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Expenses** Other. Specify 4.9 **Duke Health** Last 4 digits of account number Unknown Nonpriority Creditor's Name 5213 South Alston Avenue When was the debt incurred? Durham, NC 27713 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Expenses ☐ Yes

Debt	or 1 William T. Reitz	Document Page 17 of 48 Case number (if known) 19-70481	
4.1	Duka Madiaina		Halmann
0	Duke Medicine Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	PO Box 70841	When was the debt incurred?	
	Charlotte, NC 28272	As of the date was file the algin in Oheal all that such	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
	′	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Expenses	
4.1	Foundation Medicine	Last 4 digits of account number	Unknown
1	Nonpriority Creditor's Name		
	PO Box 347790	When was the debt incurred?	
	Pittsburgh, PA 15251 Number Street City State Zip Code	As of the date year file, the plains in Observation What seems	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	_		
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical Expenses	
4.1 2	Geisinger Health System	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 100 N. Academy Avenue	When was the debt incurred?	
	Danville, PA 17822		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Medical Debt

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Case 19-70481-JAD Doc 21 Filed 09/13/19 Entered 09/13/19 06:38:23 Desc Main Document Page 18 of 48

William T. Reitz		Case number (if known) 19-70481	
Guardant Health Inc.	Last 4 digits of account number		Unknov
Nonpriority Creditor's Name 29308 Network PI	When was the debt incurred?		
Chicago, IL 60673 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	rio or ano dano you me, ano eram	C. C	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Medical Ex	penses	
Holiday Financial Serv	Last 4 digits of account number	2405	\$0.
Nonpriority Creditor's Name	_		
1800 Daisy Street Ext St Clearfield, PA 16830	When was the debt incurred?	Opened 11/12 Last Active 5/14/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	og plans, and other similar debts	
■ No	■ Other. Specify Notice Only		
	- Other. Specify	<u>, </u>	
Jefferson Capital	Last 4 digits of account number	2230	\$10,287
Nonpriority Creditor's Name PO BOX 7999 Saint Cloud, MN 56302	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	

☐ Yes

■ Other. Specify Collection for Bank of America

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Debtor 1 William T. Reitz ase number (if known) 19-70481 4.1 Jersey Shore Bank Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name **PO Box 967** When was the debt incurred? Williamsport, PA 17703 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Overdrawn Account ☐ Yes 4.1 Keystone Rural Health Consotia Unknown Last 4 digits of account number Nonpriority Creditor's Name 90 E. 2nd Street When was the debt incurred? Emporium, PA 15834 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Expenses ☐ Yes 4.1 Midland Credit Management Unknown 8 Last 4 digits of account number Nonpriority Creditor's Name 8875 Aero Drive When was the debt incurred? Suite 200 San Diego, CA 92123 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Credit one ☐ Yes

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1 William T. Reitz Case number (if known) 19-70481

Debtor	1 William T. Reitz		Case number (if known) 19-7	0481
4.1	Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number	2998	\$552.00
	320 E Big Beaver Rd Ste Troy, MI 48083	When was the debt incurred?	Opened 02/17 Last Active 7/29/17	e
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you	did not
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Bank N.A.	Company Account Credit O	ne
4.2	MiraMed Revenue Group	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 536 Linden, MI 48451	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you	did not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Collection	For Medical Expenses	
4.2	Miramedrg	Last 4 digits of account number	4268	\$57.00
	Nonpriority Creditor's Name 360 E. 22nd Street Lombard, IL 60148	When was the debt incurred?	Opened 4/19/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you	did not
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		

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Document Page 21 of 48 Debtor 1 William T. Reitz ase number (if known) 19-70481 4.2 Mt Nittany Medical Center Unknown Last 4 digits of account number 2 Nonpriority Creditor's Name 1800 E Park Ave When was the debt incurred? State College, PA 16803 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Expenses ☐ Yes 4.2 **National Recovery Agen** 8588 \$107.00 Last 4 digits of account number Nonpriority Creditor's Name 2491 Paxton St When was the debt incurred? **Opened 10/18** Harrisburg, PA 17111 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Mshmc Physicians Group ☐ Yes 4.2 **National Recovery Agen** 8583 \$107.00 Last 4 digits of account number Nonpriority Creditor's Name 2491 Paxton St When was the debt incurred? **Opened 10/18** Harrisburg, PA 17111 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for Mshmc Physicians Group

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 22 of 48 Document Debtor 1 William T. Reitz ase number (if known) 19-70481 4.2 **Penelec** \$1,200.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 76 South Main Street When was the debt incurred? A-RPC Akron, OH 44308-1890 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.2 Penn Highlands Brookville Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name **PO Box 447** When was the debt incurred? Du Bois, PA 15801 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Expenses ☐ Yes 4.2 **Penn State Hershey Medical Center** Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 853 When was the debt incurred? Hershey, PA 17033 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only

■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Expenses

☐ Yes

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331 Newman Springs Rd., Building

Red Bank, NJ 07701

Red Balik, NJ 07701

Name and Address penelec

Official Form 106 F/F

Name and Address

Penelec

PO Box 16001 Reading, PA 19612-6001 On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Last 4 digits of account number

Last 4 digits of account number

Line 4.25 of (Check one):

Debtor 1 William T. Reitz

Page 24 of 48 Case number (if known)

19-70481

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 140.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 140.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 14,011.70
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 14,011.70

		1200000	
Fill in this infor	rmation to identify your	case:	
Debtor 1	William T. Reitz		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	WESTERN DISTRICT C	DF PENNSYLVANIA
Case number	19-70481		
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	City		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 26 o	of 48	
Fill in this	information to identify your	case:			
Debtor 1	William T. Reitz				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case num	ber 19-70481				
(if known)	19-70401				☐ Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Cod	obtore			42/45
Scried	iule II. Toul Cou	EDIOI 2			12/15
fill it out, a your name		boxes on the left. Attack . Answer every question	n the Additional Page to	o this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
1. 50	you have any codebiors: (ii	you are ming a joint case,	do not hat eliner apouae	as a codebior.	
■ No □ Yes	S				
	hin the last 8 years, have you na, California, Idaho, Louisiana				ty states and territories include)
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt les that apply:
3.1				☐ Schedule D, lir	20
	Name			_ ☐ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street City	State	ZIP Code	_	
2.0				Под 11 5 11	
3.2	Name			☐ Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule E/F,	
-	Number Street				-
	City	State	ZIP Code		

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Fill	in this information to	o identify your c	ase:								
Del	otor 1	William T. R	eitz								
_	otor 2 buse, if filing)					_					
Uni	ted States Bankrup	tcy Court for the	: WESTERN DISTRIC	Γ OF PENNSYLVAN	IA	_					
Cas	se number 19-	70481					Chec	k if this is	:		
(If kr	nown)			-				n amende	ed filing		
_										g postpetition ollowing date:	
0	fficial Form	<u> 1061</u>					Ī	/M / DD/ \	YYYY		
S	chedule I: `	Your Inc	ome								12/1
	<u> </u>	e Employment	On the top of any additi	Debtor 1	oui ilailli	and	. case III		·	ling spouse	question
		4h :-h		_				☐ Empl		mig opodoo	
	If you have more tattach a separate information about	page with	Employment status	■ Employed□ Not employed					mployed		
	employers.		Occupation	Welder							
	Include part-time, self-employed wo		Employer's name	Quality Machin	ing Inc.						
	Occupation may in or homemaker, if		Employer's address	622 East Rollin Bellefonte, PA		Dri	ve				
			How long employed t	here? 20 yea	rs			_			
Par	t 2: Give Det	tails About Mor	nthly Income								
Esti spoi	mate monthly incouse unless you are s	ome as of the diseparated.	ate you file this form. If	you have nothing to I	report for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing e space, attach a se		ore than one employer, co	ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	3	,718.00	\$	N/A	-
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4	\$	37	18 00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debto	r 1	William T. Reitz		Case r	number (<i>if known</i>)	19-7048	<u> </u>	
				For	Debtor 1	For Deb		
	Can	y line 4 here	4	\$	2 740 00	non-filin	g spouse	
	Сор	y line 4 here	4.	Φ	3,718.00	Φ	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	740.95	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	218.75	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$	0.00	, \$	N/A N/A	
			_	· · ·				
		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	959.70	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,758.30	\$	N/A	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•				
	O.L.	monthly net income.	8a.	\$	0.00	\$	N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	\$	0.00	\$	N/A	
	oc.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,758.30 + \$	N	/A = \$ 2,758	0 20
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'υ. Ψ-			IN	$\frac{ \Psi }{ \Psi } = \frac{2,750}{2}$	5.30
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depend			ed in <i>Sche</i> e	_	0.00
		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies				, if it	2. \$ 2,75	8.30
	_						Combined monthly inco	me
13.	Do y	ou expect an increase or decrease within the year after you file this form? No. Yes Explain:	?					

Official Form 106l Schedule I: Your Income page 2

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Fill	in this information to identify your case:				
Deb	otor 1 William T. Reitz		Che	ck if this is:	
Dok	otor 2			An amended filing	
	ouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
Uni	ted States Bankruptcy Court for the: WESTERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
Cas	e number 19-70481				
1	nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Househ	old of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Sill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No □ Yes
					□ res
					□ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a supplicitable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	\$	100.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	\$	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	75.00
E	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor		4d. 5	·	0.00

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Debtor 1 Willian	n T. Reitz	Case number (if known)	19-70481
 Utilities: 6a. Electrici 	ty, heat, natural gas	6a. \$	325.00
	•	6b. \$	110.00
	sewer, garbage collection	· · · · · · · · · · · · · · · · · · ·	
•	ne, cell phone, Internet, satellite, and cable services		55.00
6d. Other. S	·	6d. \$	0.00
	usekeeping supplies	7. \$	400.00
Childcare and	d children's education costs	8. \$	0.00
Clothing, laur	ndry, and dry cleaning	9. \$	25.00
Personal care	products and services	10. \$	25.00
1. Medical and o	lental expenses	11. \$	50.00
2. Transportatio	n. Include gas, maintenance, bus or train fare.		
	car payments.	12. \$	240.00
Entertainmen	t, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
 Charitable co 	ntributions and religious donations	14. \$	0.00
5. Insurance.			
Do not include	insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insu	ırance	15a. \$	0.00
15b. Health in	nsurance	15b. \$	0.00
15c. Vehicle	insurance	15c. \$	95.00
	surance. Specify:	15d. \$	0.00
	include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:	molde taxes deducted from your pay or included in lines 4 or 20.	16. \$	0.00
	lease payments:		
17a. Car pay	ments for Vehicle 1	17a. \$	0.00
17b. Car pay	ments for Vehicle 2	17b. \$	0.00
17c. Other. S	Specify:	17c. \$	0.00
17d. Other. S		17d. \$	0.00
	ts of alimony, maintenance, and support that you did not report a	· · <u></u>	
	m your pay on line 5, Schedule I, Your Income (Official Form 106I)	. 18. \$	0.00
Other paymer	nts you make to support others who do not live with you.	\$	0.00
Specify:		19.	
). Other real pro	pperty expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Your Income.	
20a. Mortgag	les on other property	20a. \$	0.00
20b. Real est	tate taxes	20b. \$	0.00
20c. Property	y, homeowner's, or renter's insurance	20c. \$	0.00
20d. Mainten	ance, repair, and upkeep expenses	20d. \$	0.00
	vner's association or condominium dues	20e. \$	0.00
 Other: Specify 		21. +\$	150.00
i. Other. Specify	Miscellaneous Expenses	Ζ1. ΤΦ	190.00
-	r monthly expenses		
22a. Add lines	4 through 21.	\$	1,650.00
22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
	22a and 22b. The result is your monthly expenses.	\$	1,650.00
		Ψ	1,030.00
	r monthly net income.		_
23a. Copy lin	e 12 (your combined monthly income) from Schedule I.	23a. \$	2,758.30
23b. Copy yo	our monthly expenses from line 22c above.	23b\$	1,650.00
	t your monthly expenses from your monthly income.	23c. \$	1,108.30
i ne resi	ult is your monthly net income.	200. Ψ	1,100.00
4. Do vou exped	et an increase or decrease in your expenses within the year after y	ou file this form?	
	you expect to finish paying for your car loan within the year or do you expect yo		rease or decrease because of a
	ne terms of your mortgage?	· ·	
■ No.			
☐ Yes.	Explain here:		

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Fill in this inf	formation to identify your	case:				
Debtor 1	William T. Reitz					
	First Name	Middle Name	Last Nar	ne		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Nar	ne		
United States	Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLV	ANIA		
Case number	19-70481					
(if known)					[Check if this is an amended filing
Official Ec	orm 106Dec					
	ation About a	n Individual	Debtor	's Schedı	ules	12/15
·	ı. 18 U.S.C. §§ 152, 1341, 1 Sign Below	519, and 35/1.				
Did you	pay or agree to pay some	one who is NOT an attor	ney to help yo	u fill out bankruptc	y forms?	
■ No						
☐ Yes	s. Name of person				, ,	Petition Preparer's Notice, gnature (Official Form 119)
	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and sche	dules filed with thi	is declaration and	
X /s/ W	Villiam T. Reitz		X			
	iam T. Reitz ature of Debtor 1		Siç	gnature of Debtor 2		
Date	September 13, 2019		Da	ate		

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Fill in	this info	rmation to identify you	r case:			
Debto	r 1	William T. Reitz				
		First Name	Middle Name	Last Name		
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name		
United	l States E	Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Case	number	19-70481				
(if know		13-70401			-	Check if this is an
					a	mended filing
		<u>orm 107</u>				
Stat	emen	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
inform numbe	ation. If er (if kno	more space is needed, wn). Answer every que	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup additional pages, write you	
Part 1		our current marital statu	rital Status and Where You	Lived Before		
_	_		13:			
		ed arried				
2. D	uring the	last 3 years, have you	lived anywhere other than	where you live now?		
	No					
		ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.	
C	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
siales i	anu terni	ones include Anzona, Ca	iliomia, idano, Lodisiana, Ne	vada, New Mexico, Fuello Ki	co, rexas, washington and w	riscorisiri.)
_	No					
L	J Yes. I	Make sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Ехр	ain the Sources of You	r Income			
Fi	ll in the to	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
] No					
		Fill in the details.				
			Debtor 1		Dahtar 2	
			Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
the date voll filed for pankfilbtcy.			■ Wages, commissions, bonuses, tips	\$24,666.31	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 William T. Reitz

				Debtor 1					Debtor 2		
				Sources of i		(bet	oss income fore deductions a lusions)	nd	Sources of inco		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips			\$27,026	.00	☐ Wages, comr bonuses, tips	nissions,			
				☐ Operating	a business				☐ Operating a b	ousiness	
		dar year bef December 3		■ Wages, co			\$41,737	.00	☐ Wages, common bonuses, tips	nissions,	
				☐ Operating	a business				☐ Operating a b	ousiness	
	and other winnings. List each s	public benef If you are fili	it payments; ng a joint ca he gross inc	pensions; renta se and you hav	al income; inter e income that y	rest; div you rec	vidends; money o eived together, li	collecte st it or	mony; child suppo ed from lawsuits; r ily once under Del at you listed in line	oyalties; and btor 1.	ecurity, unemployment d gambling and lottery
				Debtor 1 Sources of in Describe belo		eac (bet	ess income from h source fore deductions a lusions)		Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December 3	31, 2018)	PA Unempl Compensa	loyment tion		\$6,944	.00			
		dar year bef December 3		Retirement Distribution			\$5,139.	.00			
Pai	rt 3: List	Certain Pa	vments You	ı Made Before	You Filed for	Bankrı	uptcv				
6.		Debtor 1's Neither De	or Debtor 2 btor 1 nor l	2's debts prima	arily consume	r debts umer d	s? ebts. Consumer	debts	are defined in 11	U.S.C. § 101	(8) as "incurred by an
		During the	90 days bef	ore you filed for	bankruptcy, di	id you p	pay any creditor a	a total	of \$6,825* or more	э?	
		□ No.	Go to line	7.							
		Yes	paid that continuity	reditor. Do not i payments to a	nclude paymer n attorney for t	nts for o	domestic support kruptcy case.	obliga		ld support a	ne total amount you and alimony. Also, do
	Yes.	Debtor 1 o	r Debtor 2	or both have p	rimarily consu	ımer d	ebts.		of \$600 or more?	adjustinoni.	
		■ No.	Go to line	·		,,					
		☐ Yes	List below include pay	each creditor to	estic support o				the total amount y ort and alimony. A		creditor. Do not nclude payments to ar
	Creditor'	s Name and	I Address	D	ates of payme	ent	Total amour	nt	Amount you	Was this n	ayment for
					, ,		pai		still owe		•

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Debtor 1 William T. Reitz

7.	Within 1 year before you filed for bankruptur Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for		
	No☐ Yes. List all payments to an insider.							
		Dates of navement	Total amazunt	A	Dansau fau	this was made		
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an		
	No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment litor's name		
Pa	t 4: Identify Legal Actions, Repossession	as and Forcelecures	•					
Га	t 4: Identify Legal Actions, Repossession	is, and roleclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	■ No. Go to line 11.□ Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happened	4			property		
		Explain what happened	4					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec		luding a bank or fir	nancial institution	, set off any a	amounts from your		
	Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the creditor took Date action was Amount taken						
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a		
	☐ Yes							
Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?		
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

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Debtor 1 William T. Reitz

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity. No						
	Yes. Fill in the details for each gift or co Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,	
	■ No □ Yes. Fill in the details.						
		Include	ibe any insurance coverage for the lo e the amount that insurance has paid. L nce claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition process.	repari	ng a bankruptcy petition?			rty to anyone you	
	No						
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any propertransferred	Date payment or transfer was made	Amount of payment		
	McElrath Legal Holdings, LLC 1641 Saw Mill Run Blvd. Pittsburgh, PA 15210		costs \$500.00 fees \$500.00	July 31, 2019	\$500.00		
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that No	itors o	or to make payments to your creditors		r transfer any prope	rty to anyone who	
	Yes. Fill in the details.		Barrietian and advantage		D-1	A	
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment	
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your princlude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made	
	Person's relationship to you						

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Debtor 1 William T. Reitz

19.	beneficiary? (These are often called asset-prote		property to a so	en-settled trust of similar device	or wnich you are a				
	Yes. Fill in the details.								
	Name of trust	Description and va	lue of the prope	erty transferred	Date Transfer was made				
Par	t 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit I	Boxes, and Stor	rage Units					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial account	s; certificates o	of deposit; shares in banks, credit					
	Yes. Fill in the details.								
			Type of accoun instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 yes cash, or other valuables?	ar before you filed for b	oankruptcy, any	safe deposit box or other depos	itory for securities,				
	No Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Stre State and ZIP Code)		Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Includ	le any property	you borrowed from, are storing f	or, or hold in trust				
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)	rty? Die te and ZIP	Describe the property	Value				
	Tt 10: Give Details About Environmental Inform								
For	the purpose of Part 10, the following definition	is apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, groundw	•					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 William T. Reitz

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?			ental law?			
	No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Con	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, c	did you own a business or have an	y of the following connections to any	/ business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	■ No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name Des Address	scribe the nature of the business	Employer Identification number Do not include Social Security			
		me of accountant or bookkeeper	Dates business existed	number of frint.		
28.	Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	ude all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	te Issued				
	· · · · · · · · · · · · · · · · · · ·					

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Debtor 1 William T. Reitz

Part 1	2: Sign Below		
are tru with a	e and correct. I understand that makir	•	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/ W	illiam T. Reitz		
Willia	nm T. Reitz	Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	September 13, 2019	Date	
Did yo	u attach additional pages to Your Stat	tement of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who is	s not an attorney to help you fill out bankrupto	cy forms?
■ No			
☐ Yes	. Name of Person Attach the Ba	nkruptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	William T. Reitz				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the:		Western District of Pennsylvania			
Case number (if known)	19-70481				

Check	Check as directed in lines 17 and 21:				
1	According to the calculations required by this Statement:				
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	☐ 4. The commitment period is 5 years.				
☐ Check if this is an amended filing					

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	t 1: Calculate Your Average Monthly Income					
1.	What is your marital and filing status? Check one	only.				
	Not married. Fill out Column A, lines 2-11.					
	☐ Married. Fill out both Columns A and B, lines 2-1	1.				
t	fill in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the 6 ne 6 months, add the income for all 6 months and divide the to pouses own the same rental property, put the income from that	6-month period wo otal by 6. Fill in the	uld be March 1 thro result. Do not inclu	ough August 31. If the am ide any income amount n	ount of your monthly income nore than once. For example	e varied during e, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commis	sions (before all	\$3,951.70	\$	
3.	Alimony and maintenance payments. Do not inclu Column B is filled in.	de payments fro	om a spouse if	\$	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a spoyou listed on line 3.	ort. Include regunold, your depen	lar contributions dents, parents,	\$0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1				
	Gross receipts (before all deductions)	\$0.0				
	Ordinary and necessary operating expenses	-\$ 0.0				
	Net monthly income from a business, profession, or	fa _{rm \$} 0.0	O Copy here ->	>\$	\$	
6.	Net income from rental and other real property	Debtor 1	_			
	Gross receipts (before all deductions)	\$ 0.0				
	Ordinary and necessary operating expenses	-\$ 0.0				
	Net monthly income from rental or other real property	v ¢ 0.0	O Copy here ->	· \$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse____ 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 3.951.70 +|\$ 3,951.70 each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 3,951.70 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 3,951.70 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 3,951.70 15a. Copy line 14 here=>____ Multiply line 15a by 12 (the number of months in a year). **x** 12 47,420.40 15b. The result is your current monthly income for the year for this part of the form.

William T. Reitz

Debtor 1

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William T. Reitz 19-70481 Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. PA 16b. Fill in the number of people in your household. 1 16c. Fill in the median family income for your state and size of household. 55.117.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 3.951.70 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 3,951.70 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 3,951.70 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 47,420,40 \$ 20b. The result is your current monthly income for the year for this part of the form 55,117.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ William T. Reitz William T. Reitz Signature of Debtor 1 Date September 13, 2019

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

If you checked 17a, do NOT fill out or file Form 122C-2.

MM / DD / YYYY

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Debtor 1 William T. Reitz Case number (if known) 19-70481

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2019 to 07/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Quality Machining Inc.

Year-to-Date Income:

Starting Year-to-Date Income: \$\,\bigsymbol{\$0.00}\] from check dated \$\,\bigsymbol{\$1/31/2019}\]. Ending Year-to-Date Income: \$\,\bigsymbol{\$23,710.17}\] from check dated \$\,\bigsymbol{\$7/31/2019}\].

Income for six-month period (Ending-Starting): \$23,710.17.

Average Monthly Income: \$3,951.70.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-70481-JAD Doc 21 Filed 09/13/19 Entered 09/13/19 06:38:23 Desc Main Document Page 47 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	William T. Reitz		Case No.	19-70481
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid t	o me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received		\$	100.00
	Balance Due		\$	3,900.00
2. Т	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed comp	pensation with any other person t	inless they are memb	ers and associates of my law firm.
Ī	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5. 1	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy ca	ase, including:
b c	Analysis of the debtor's financial situation, and rendo. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of crediter.	tement of affairs and plan which	may be required;	
d	I. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation	mption planning; and filing of motio	preparation and filing of one pursuant to 11 USC
6. E	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	presentation of the debtor(s) in
Se	eptember 13, 2019	/s/ Paul W. McElra	ith, Jr.	
	ate	Paul W. McElrath, Signature of Attorney	Jr.	
		McElrath Legal Ho	oldings, LLC	
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		Name of law firm		

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United States Bankruptcy Court Western District of Pennsylvania

In re	William T. Reitz		Case No.	19-70481
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The abo	ove-named Debtor hereby verifies t	that the attached list of creditors is true and correct to the best of his/her knowledge.
Date:	September 13, 2019	/s/ William T. Reitz
		William T. Reitz
		Signature of Debtor